## Case 24-32536-swe13 Doc 1 Filed 08/24/24 Entered 08/24/24 15:10:35 Desc Main Document Page 1 of 91

Fill in this information to identify your case	:	
United States Bankruptcy Court for the:  Northern District of Texas		
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is ar amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Christian	
	Write the name that is on your government-issued picture	First name	First name
	identification (for example, your driver's license or passport).	Middle name	Middle name
	• • •	Hernandez	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any separate legal entity such as a	Christian Hernandez	
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)  Christian Hernandez-Contract Driver	Business name (if applicable)
		Amazon Flex Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>0</u> <u>1</u> <u>8</u> <u>5</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 Christian	Hernandez	Case number (if known)		
	First Name	Middle Name Last Name	·		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification	1			
	Number (EIN), if any.	EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
	oro youo	14332 Montfort Dr Apt 11304			
		Number Street	Number Street		
		Dallas, TX 75254			
		City State ZIP Code	City State ZIP Code		
		Dallas			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing this	Check one:	Check one:		
	district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)		

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Debt	tor 1 Christian	Hernandez	Case number (if known)
	First Name	Middle Name Last Name	
Par	t 2: Tell the Court About Yo	ur Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file under		of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for to the top of page 1 and check the appropriate box.
8.	<ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your local cour details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, check, or money order. If your attorney is submitting your payment on your behalf, your attorney may a credit card or check with a pre-printed address.</li> <li>I need to pay the fee in installments. If you choose this option, sign and attach the Application for Into Pay The Filing Fee in Installments (Official Form 103A).</li> <li>I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By judge may, but is not required to, waive your fee, and may do so only if your income is less than 150 official poverty line that applies to your family size and you are unable to pay the fee in installments) choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official 103B) and file it with your petition.</li> </ul>		Typically, if you are paying the fee yourself, you may pay with cash, cashier's attorney is submitting your payment on your behalf, your attorney may pay with e-printed address.  Inents. If you choose this option, sign and attach the <i>Application for Individuals ments</i> (Official Form 103A).  If (You may request this option only if you are filing for Chapter 7. By law, a popular your fee, and may do so only if your income is less than 150% of the to your family size and you are unable to pay the fee in installments). If you led the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form
9.	Have you filed for bankruptcy within the last 8 years?	✓ No.  ☐ Yes. District  District  District	When Case number  MM / DD / YYYY  When Case number  MM / DD / YYYY  When Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	District	Relationship to you  When Case number, if known  MM / DD / YYYY  Relationship to you  When Case number, if known
11.	Do you rent your residence?	✓ No. Go to line 12.	ed an eviction judgment against you? atement About an Eviction Judgment Against You (Form 101A) and file it iptcy petition.

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Debtor 1 Christian		Hernandez			Case number (if known)		
	Firs	st Name	Middle Name	Last Name		, , , , , , , , , , , , , , , , , , , ,	
Par	t 3: Report Ab	out Any Busin	esses You	Own as a Sole Proprietor			
12.	Are you a sole pany full- or part-business?  A sole proprietors business you open individual, and is legal entity such corporation, partirely on the partire of the partire	ship is a erate as an not a separate as a nership, or LLC.	Chris	ame and location of business  stian Hernandez f business, if any  2 Montfort Dr Apt 11304			
	proprietorship, us sheet and attach		Dalla	s	TX	75254	
	petition.		City		State	ZIP Code	
			Check	the appropriate box to describe you	r business:		
			☐ He	alth Care Business (as defined in 11	U.S.C. § 101(27)	A))	
			☐ Sir	ngle Asset Real Estate (as defined ir	n 11 U.S.C. § 101(	51B))	
			☐ Sto	ockbroker (as defined in 11 U.S.C. §	101(53A))		
			☐ Co	mmodity Broker (as defined in 11 U.	S.C. § 101(6))		
			☑ No	ne of the above	- , ,,		
13.	Are you filing un 11 of the Bankru and are you a su debtor?	ıptcy Code,	appropriate sheet, state	iling under Chapter 11, the court must e deadlines. If you indicate that you a ement of operations, cash-flow states of the procedure in 11 U.S.C. § 1116(	are a small busines ment, and federal	ss debtor, you must attach your	most recent balance
	For a definition of	f small business	☑ No.	I am not filing under Chapter 11.			
	debtor, see 11 U. 101(51D).	S.C. §	☐ No.	I am filing under Chapter 11, but I a Bankruptcy Code.	am NOT a small b	usiness debtor according to the	definition in the
			☐ Yes.	I am filing under Chapter 11, I am a Bankruptcy Code, and I do not cho			
			☐ Yes.	I am filing under Chapter 11, I am a Bankruptcy Code, and I choose to			in the

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Deb	tor 1 (	Christian		Hernandez	Case number (if known)
	F	First Name	Middle Name	Last Name	
Par	t 4: Report if	f You Own or Ha	ave Any Hazar	dous Property or	Any Property That Needs Immediate Attention
14.	Do you own o	r have any	☑ No.		
	property that alleged to posimminent and hazard to pub safety? Or do property that attention?  For example, of perishable good	poses or is se a threat of identifiable lic health or you own any needs immediate do you own ds, or livestock		at is the hazard?	needed, why is it needed?
	that must be fe that needs urgo	ed, or a building ent repairs?	Whe	ere is the property?	Number Street

City

State

ZIP Code

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Debtor 1	Christian		Hernandez	Case number (if known)	
	First Name	Middle Name	Last Name	, ,	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ı	I am not required to receive a briefing about credit
	counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Christian		Hernandez			Case number (if known)		
		First Name	Middle N	ame Last Name				,	
Par	t 6: Answe	r These Question	s for Re	eporting Purposes					
16. What kind of debts do you have?			16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.					
			16b.			<b>s debts?</b> Business debts are debts rough the operation of the business			
			16c.	State the type of debts you ow	ve th	at are not consumer debts or busing	ess c	lebts.	
17.	•	ng under Chapter 7?	<b>1</b>	No. I am not filing under Charter Yes. I am filing under Chapte		7. Go to line 18.  Do you estimate that after any exer	mnt n	roperty is excluded and	
	exempt prop and administ paid that fur	mate that after any perty is excluded strative expenses are nds will be available ion to unsecured				paid that funds will be available to			
18.	How many o	creditors do you It you owe?		□ 50-99 □ 5,001-10,000 □ 100-199 □ 10,001-25,000			000		
19.	How much o	do you estimate you worth?	r <b>V</b>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much o	do you estimate you be?	r 🗓	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Par	t 7: Sign B	elow							
Foi	you	If I have States C If no atto have obt I request I underst bankrupt and 357	chosen to ode. I ur ode. I ur ode. I ur ode and ar ode and make occurrent to the ode of the ode ode ode ode ode ode ode ode ode od	to file under Chapter 7, I am awanderstand the relief available understand the relief available undersents me and I did not pay on a read the notice required by accordance with the chapter owing a false statement, conceal can result in fines up to \$250,000.	ware nder or ag 11 U of title	each chapter, and I choose to procee to pay someone who is not an	er Cha ceed u attorn in thi perty	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition. by fraud in connection with a	
		· -		stian Hernandez Hernandez, Debtor 1					
Exec			ecuted o	d on <u>08/24/2024</u>					

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Debtor 1	Christian		Hernandez	Case number (if known)			
	First Name	Middle Name	Last Name				
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
		X /a/ Chris	D Anderson	Data 00/04/0004			
		Signature	D Anderson of Attorney for Debtor	Date 08/24/2024 MM / DD / YYYY			
		Firm name	Law Firm, PLLC  ort Fwy Ste 401  Street				
		Hurst		TX 76054-3264			
		City		State ZIP Code			
		Contact pho	one <b>(214) 265-0123</b>	Email address <b>questions@allmandlaw.com</b>			
		Bar numbe	r	State			

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Debtor 1	Christian		Hernandez		Case number (if known)
	First Name	Middle Name	Last Name		, ,
Additional I	tems: Continuatio	n Page			
any full-	a sole proprietor of or part-time s? (cont.)	Name of business,	rnandez-Contract Dri if any ort Dr Apt 11304 reet	ver Amazon Flex	<u> </u>
		Dallas City		TX State	<b>75254-8493</b> ZIP Code
		Check the appro	opriate box to describe yo	our business:	
		Health Care	Business (as defined in	11 U.S.C. § 101(27	٩))
		☐ Single Asse	t Real Estate (as defined	l in 11 U.S.C. § 101(	51B))
		☐ Stockbroker	(as defined in 11 U.S.C.	§ 101(53A))	
		☐ Commodity	Broker (as defined in 11	U.S.C. § 101(6))	
		Mone of the	above		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.

  Consumer debts are defined in 11 U.S.C. §
  101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### Chapter 7: Liquidation

\$245 filing fee\$78 administrative fee\$15 trustee surcharge

\$338 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- most domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form—sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms /bankruptcy\_form s.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy*(Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called *ajoint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts /Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill in this inform	nation to identify you			V. 1-7 VI V.		
Debtor 1	Christian		Hernandez			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the	Northerr	District of	Texas		
Case number						Check if this is an
					<u> </u>	amended filing
Official For	m 106A/B					
Schedule	e A/B: Pro	perty				12/15
In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.						
Part 1:	Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In					
1. Do you ow	Do you own or have any legal or equitable interest in any residence, building, land, or similar property?					
☑ No. Go	to Part 2.					

Pa	rt 1:	Descr	ibe Eacl	n Residenc	e, Building, Land, or Other Real Estate	You Own or Have ar	n Interest In
1.	Do y	ou own or h	ave any le	gal or equitable	le interest in any residence, building, land, or simil	ar property?	
	<b>₫</b> N	lo. Go to Part	12.				
	□ Y	es. Where is	the propert	y?			
	1.1	Street addre	ess, if avail	able, or other	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property.
		description			<ul> <li>☐ Condominium or cooperative</li> <li>☐ Manufactured or mobile home</li> <li>☐ Land</li> <li>☐ Investment property</li> </ul>	Current value of the entire property?	Current value of the portion you own?
		City	State	ZIP Code	☐ Timeshare ☐ Other  Who has an interest in the property? Check one.		your ownership interest nancy by the entireties, or
		County	Debtor 1 only				
					<ul><li>□ Debtor 2 only</li><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	Check if this is com (see instructions)	munity property
					Other information you wish to add about this ite property identification number:	-	
2.					wn for all of your entries from Part 1, including any umber here		\$0.00
Pai	rt 2:	Descr	ibe Your	Vehicles			
					nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Control		
3.	Ca	rs, vans, tru	cks, tracto	rs, sport utilit	y vehicles, motorcycles		
		No					
	Ą	Yes					

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	3.1	Make:	Kia	Who has an interest in the property? Check one.  ✓ Debtor 1 only	Do not deduct secured of the amount of any secure	aims or exemptions. Put
		Model:	Soul	Debtor 2 only		ims Secured by Property.
		Year:	2020	<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and another</li></ul>	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	114000	Check if this is community property (see instructions)	\$12,093.00	\$12,093.00
		Other information:		manucions)		
		Source of Value: Debtor's main soutransportation. VIN: xx9663				
4.		<i>nples:</i> Boats, trailers, mo o	-	nd other recreational vehicles, other vehicles, and vatercraft, fishing vessels, snowmobiles, motorcycle ac		
	4.1	Make:		Who has an interest in the property? Check one.	Do not deduct secured cl	nime or exemptions. But
		Model:		Debtor 1 only Debtor 2 only	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
		Year:		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of the
		Other information:		☐ Check if this is community property (see	entire property?	portion you own?
				instructions)		
5.				vn for all of your entries from Part 2, including any		\$12,093.00
	you .	iavo attaonoa ioi i ait	21 Willo tilat ili			
Pa	rt 3:	Describe You	r Personal a	and Household Items		
Do y	ou owi	n or have any legal or	equitable inter	est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Hous	ehold goods and furn	ishings			
	Exam	nples: Major appliances	s, furniture, liner	ns, china, kitchenware		
	□ N	_				
	<b>⊻</b> I Y€	es. Describe	See Attached	J.		\$440.00
7.		•		deo, stereo, and digital equipment; computers, printers cluding cell phones, cameras, media players, games	s, scanners; music	
	□ N	-				
	<b>✓</b> Y6	es. Describe	See Attached	i.		\$600.00

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Debtor Christian Hernandez

Case	number	(if known)	)

8.	Collectibles of value		
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles	
	☐ No		
	Yes. Describe	Books, Family Pictures, Art Objects, CDS	\$80.00
9.	Equipment for sports and	hobbies	
		raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments	
	<b>☑</b> No		
	Yes. Describe		
10.	Firearms		
	·	hotguns, ammunition, and related equipment	
	<b>₫</b> No		
	Yes. Describe		
11.	Clothes		
	Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories	
	☐ No		
	Yes. Describe	Clothing (Adult, 1)	\$200.00
12.	Jewelry		
	Examples: Everyday jewel silver	ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	<b>☑</b> No		
	Yes. Describe		
13.	Non-farm animals		
	Examples: Dogs, cats, bird	ds, horses	
	□ No		
	Yes. Describe	Dog	\$50.00
14.	Any other personal and he	ousehold items you did not already list, including any health aids you did not list	
	<b>☑</b> No		
	Yes. Give specific information		
15.		of your entries from Part 3, including any entries for pages you have attached	\$1,370.00
Pa	rt 4: Describe You	ur Financial Assets	

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Debtor Christian Hernandez

Case number (if known)

Do yo	ou own or have any leg	gal or equitable interest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you	have in your wallet, in your home	e, in a safe deposit box, and on hand when you file your petition	
	☐ No ☑ Yes		Cash:	\$0.00
17.	Deposits of money  Examples: Checking.	savings, or other financial accour	nts; certificates of deposit; shares in credit unions, brokerage houses,	
	and other s		ltiple accounts with the same institution, list each.	
	☐ No ☑ Yes		Institution name:	
		17.1. Checking account:	Capital One Bank Account Number: 2725	\$157.00
		17.2. Checking account:	Robinhood Spending Account Number: 6D1D	\$0.00
		17.3. Savings account:	Resource One Credit Union Account Number: XX10-1	\$25.00
		17.4. Other financial account:	Robinhood Brokerage Account Number: 3470	\$200.00
		17.5. Other financial account:	Cash App issued by Sutton Bank Account Number: 5583	\$0.00
18.		or publicly traded stocks s, investment accounts with broke	erage firms, money market accounts	
	☐ No ☑ Yes	Institution or issuer name:		
		Robinhood Crypto Currer	ncy	\$16.00
19.	Non-publicly traded s LLC, partnership, and		ted and unincorporated businesses, including an interest in an	
	<b>√</b> No			
	Yes. Give specific information about them	Name of entity:	% of ownership:	

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Case	number	(if known)	

20.	Government and corp	orate bonds and other	r negotiable and non-negotiable instruments	
			s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
	<b>√</b> No			
	Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension	n accounts		
	Examples: Interests in	ı IRA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:	The Voom Group, Inc 401(k) P/S Plan administered by Sentry	\$33,839.60
			de so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications companies, or	
	Yes	Ir	nstitution name or individual:	
		Electric:		
		Gas:		
		Heating oil:		
		Security deposit on re	ntal unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract for	or a periodic payment of	f money to you, either for life or for a number of years)	
	<b>☑</b> No		, ,	
	☐ Yes	Issuer name and descr	ription:	

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24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).							
	<b>☑</b> No							
	Yes Institution name a	and description. Separately file the records of any interests.11 U.S.C. § 521(c):						
25.	Trusts, equitable or future interests in for your benefit	property (other than anything listed in line 1), and rights or powers exercisabl	e					
	<b>√</b> No							
	Yes. Give specific information about them							
			J					
26.		secrets, and other intellectual property						
		Examples: Internet domain names, websites, proceeds from royalties and licensing agreements						
	<b>☑</b> No		_					
	Yes. Give specific information about them							
			•					
27.	Licenses, franchises, and other genera	-						
		enses, cooperative association holdings, liquor licenses, professional licenses						
	☑ No		1					
	Yes. Give specific information about them							
			l					
Mon	ey or property owed to you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.					
28.	Tax refunds owed to you							
	<b>☑</b> No							
	☐ Yes. Give specific information about							
	them, including whether you already filed the returns and	Federal:						
	the tax years	State:						
		Local:						
29.	Family support							
	,	y, spousal support, child support, maintenance, divorce settlement, property						
	settlement							

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	<b>₫</b> No			
	☐ Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
	L		Property settlement:	
30.	Other amounts someone owes you			
		ance payments, disability benefits, sich d loans you made to someone else	k pay, vacation pay, workers' compensation,	
	<b>☑</b> No			
	☐ Yes. Give specific information			7
31.	Interests in insurance policies			
	Examples: Health, disability, or life insurar	nce; health savings account (HSA); cre	dit, homeowner's, or renter's insurance	
	□ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		Life Insurance Term Life		
		Insurance Death benefit: \$20,000.00	Debtor's Aunt	\$0.00
		Death Belletit. \$20,000.00	Dobtol o Adin	ψ0.00
32.	Any interest in property that is due you	from someone who has died		
	If you are the beneficiary of a living trust, e property because someone has died.	xpect proceeds from a life insurance p	policy, or are currently entitled to receive	
	<b>√</b> No			_
	Yes. Give specific information			
	L			_
33.	Claims against third parties, whether or	•	le a demand for payment	
	Examples: Accidents, employment dispute	es, insurance claims, or rights to sue		
	✓ No  ☐ Yes. Describe each claim			٦
	Tes. Describe each claim			
34.	Contingent and unliquidated clain claims	ns of every nature, including counte	erclaims of the debtor and rights to set of	if
	☑ No			
	Yes. Describe each claim			7
	<b>J</b>			
35.	Any financial assets you did not already	ı list		_
	<b>₫</b> No			
	☐ Yes. Give specific information			7

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36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$34,237.60
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	☑ No. Go to Part 6.	
	☐ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	
	☑ No	
	☐ Yes. Describe	]
		]
39.	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs electronic devices	5,
	☑ No	
	Yes. Describe	]
		_
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	☑ No	
	Yes. Describe	]
		_
41.	Inventory	
	☑ No	
	Yes. Describe	]
		_
42.	Interests in partnerships or joint ventures	
	☑ No	
	Yes. Describe	
	Name of entity: % of ownership:	
	<u></u>	

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43.	Customer lists, mailing list	s, or other compilations	
	<b>√</b> No		
	Yes. Do your lists inclu	de personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Describe.		
	_		
44.	Any business-related prop	erty you did not already list	
	<b>√</b> No		
	Yes. Give specific		
	information		
	_		
	_		
45.	Add the dollar value of all	of your entries from Part 5, including any entries for pages you have attached	40.00
		er here	\$0.00
Pa	ι	Farm- and Commercial Fishing-Related Property You Own or Have an I	Interest In.
40		ave an interest in farmland, list it in Part 1.	
46.		gal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		
	Yes. Go to line 47.		
			Current value of the
			portion you own?  Do not deduct secured
			claims or exemptions.
47.	Farm animals		
	Examples: Livestock, poulti	y, farm-raised fish	
	<b>√</b> No		
	☐ Yes		
48.	Crops—either growing or	harvested	
	<b>☑</b> No		
	☐ Yes. Give specific		
	information		

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49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade							
	<b>☑</b> No							
	☐ Yes							
50.	Farm and fishing supplies,	chemicals, and feed						
	<b>☑</b> No							
	☐ Yes							
	L							
51.	-	fishing-related property you did no	t already list					
	✓ No							
	Yes. Give specific information							
	L							
52.		of your entries from Part 6, includin		•	\$0.00			
	for Part 6. Write that numb	er here						
Pa	rt 7: Describe All I	Property You Own or Have a	an Interest in Tha	t You Did Not List Above				
53.		y of any kind you did not already lis						
00.	Examples: Season tickets,		••					
	<b>₫</b> No							
	Yes. Give specific							
	information							
	Ļ							
54.	Add the dellar value of all	of your entries from Part 7. Write th	at number bere	<b>→</b>	\$0.00			
J4.	Add the donar value of all t	or your entires from Fart 7. Write the	at number here					
Pa	rt 8: List the Total	s of Each Part of this Form						
	2.01 1.70 1.014.	<u> </u>						
55.	Part 1: Total real estate, lin	e 2		<b>→</b>	\$0.00			
56.	Part 2: Total vehicles, line	5	\$12,093.00					
57.	Part 3: Total personal and	household items, line 15	\$1,370.00					
58.	Part 4: Total financial asse	to line 26						
56.	Fait 4. Iotai illialiciai asse	is, lille 30	\$34,237.60					
59.	Part 5: Total business-relat	ted property, line 45	\$0.00					
60.	Part 6: Total farm- and fish	ing-related property, line 52	\$0.00					
61.	Part 7: Total other property	not listed, line 54 +	\$0.00					
		1		_				
62.	Total personal property. Ac	dd lines 56 through 61	\$47,700.60	Copy personal property total	+ \$47,700.60			

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63. Total of all property on Schedule A/B. Add line 55 + line 62. \$47,700.60

Official Form 106A/B Schedule A/B: Property page 11

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	Continuation Page	
6.	Household goods and furnishings	
	Bed	\$150.00
	Dining Table / Chairs	\$80.00
	Dishes / Flatware	\$20.00
	Entertainment Center	\$20.00
	Lamps-2	\$10.00
	Pots / Pans / Cookware	\$10.00
	Sofa -2	\$150.00
7.	Electronics	
	Blue Tooth Speaker	\$50.00
	Cellular Telephone	\$200.00
	Laptop	\$200.00
	Television	\$150.00

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Fill in this inform	nation to identify yo	ur case:				
Debtor 1	Christian		Hernandez			
	First Name	Middle Name	Last Name			
Debtor 2					<u></u>	
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court fo	or the: Northe	District of	Texas		
Case number						D
(if known)						Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ide	ntify the Property You	ı Claim as Exempt			•			
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description	on of the property and ule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B  Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption				
	Brief description:  Line from Schedule A/B:	2020 Kia Soul VIN: xx9663 Debtor's main source of transportation.	\$12,093.00	<u> </u>	\$0.00  100% of fair market value, up to any applicable statutory limit  \$0.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)  11 U.S.C. § 522(d)(5)			
	Brief description: Line from Schedule A/B:	Sofa -2 6	\$150.00	<b>1</b>	\$150.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
3.	any applicable statutory limit								

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Case number (if known) \_

Debtor 1

Christian First Name

Middle Name

Last Name

Part 2: Additional Page Brief description of the property and Current value of the Specific laws that allow exemption Amount of the exemption you claim line on Schedule A/B that lists this portion you own Check only one box for each exemption. property Copy the value from Schedule A/B Brief **Entertainment** \$20.00 description: Center  $\sqrt{}$ \$20.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Brief Dining Table / \$80.00 description: Chairs  $\overline{\mathbf{A}}$ \$80.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief \$20.00 Dishes / Flatware  $\mathbf{\Lambda}$ description: \$20.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief Pots / Pans / \$10.00 description: Cookware  $\sqrt{\phantom{a}}$ \$10.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief \$150.00 Bed  $\sqrt{}$ description: \$150.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief \$10.00 Lamps-2  $\overline{\mathbf{A}}$ description: \$10.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief \$150.00 Television  $\sqrt{}$ description: \$150.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Brief \$200.00 Laptop description:  $\sqrt{}$ \$200.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Brief \$50.00 **Blue Tooth** description: Speaker  $\sqrt{}$ \$50.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit

Christian

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First Name

Debtor 1

Middle Name

Last Name

Case number (if known)

F	Part 2: Add	litional Page				
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own  Copy the value from Schedule A/B		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Brief description:	Cellular Telephone	\$200.00	<b>4</b>	\$200.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
	Brief description:	Books, Family Pictures, Art	\$80.00			
		Objects, CDS			\$80.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B:	8			100% of fair market value, up to any applicable statutory limit	_
	Brief description:	Clothing (Adult, 1)	\$200.00	<b>4</b>	\$200.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	
	Brief description:	Dog	\$50.00	<b>√</b>	\$50.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B:	13			100% of fair market value, up to any applicable statutory limit	
	Brief	Cash	\$0.00			
	description:				\$0.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B:	16			100% of fair market value, up to any applicable statutory limit	_
	Brief description:	Capital One Bank Checking account	\$157.00			
		Acct. No.: 2725		Ą	\$157.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_
	Brief description:	Resource One Credit Union	\$25.00			
		Savings account				
		Acct. No.: XX10-1		$\checkmark$	\$25.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
	Brief description:	Robinhood	\$0.00			
	accomplion.	Spending Checking account				
		Acct. No.: 6D1D		$\checkmark$	\$0.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	

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Case number (if known) \_

Last Name

Middle Name

Part 2: A	additional Page				
	ption of the property and edule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B  Amount of the exemption you claim  Check only one box for each exemption.		Specific laws that allow exemptio	
Brief description:	Robinhood Brokerage Brokerage account Acct. No.: 3470	\$200.00	<b>√</b>	\$200.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/	B:17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Robinhood Crypto Currency	\$16.00	<u> </u>	\$16.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/	B: 18			100% of fair market value, up to any applicable statutory limit	
Brief description:	The Voom Group, Inc 401(k) P/S Plan administered by	\$33,839.60			
	Sentry		<b>A</b>	\$33,839.60	11 U.S.C. § 522(d)(12)
Line from Schedule A/	B: <b>21</b>			100% of fair market value, up to any applicable statutory limit	
Brief description:	Life Insurance Term Life Insurance Death	\$0.00			
	benefit: \$20,000.00		<b>√</b>	\$0.00	11 U.S.C. § 522(d)(7)
Line from Schedule A/	B: 31			100% of fair market value, up to any applicable statutory limit	

Debtor 1

First Name

IN RE: Christian Hernandez CASE NO

CHAPTER 13

Scheme Selected: Federal

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Total **Total Amount** Gross **Total Amount** No. Category **Property Value Encumbrances Total Equity** Exempt Non-Exempt 1. Real Estate \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 3. Motor vehicle \$0.00 \$0.00 \$0.00 4. Watercraft, trailers, motors homes, and \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 accessories 6. Household goods and furnishings \$440.00 \$0.00 \$440.00 \$440.00 \$0.00 7. **Electronics** \$600.00 \$0.00 \$600.00 \$600.00 \$0.00 Collectibles of value \$80.00 8. \$80.00 \$0.00 \$80.00 \$0.00 \$0.00 \$0.00 9. Equipment for sports and hobbies \$0.00 \$0.00 \$0.00 10. **Firearms** \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 11. Clothes \$200.00 \$0.00 \$200.00 \$200.00 \$0.00 12. Jewelry \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 13. Nonfarm animals \$50.00 \$0.00 \$50.00 \$50.00 \$0.00 Other 14. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Cash \$0.00 \$0.00 16. \$0.00 \$0.00 \$0.00 17. Deposits of money \$382.00 \$0.00 \$382.00 \$382.00 \$0.00 18. Bonds, mutual funds, or publicly traded \$16.00 \$0.00 \$16.00 \$16.00 \$0.00 stocks 19. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock 20. Bonds and other financial instruments \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 21. Retirement or pension accounts \$33,839.60 \$0.00 \$33,839.60 \$33,839.60 \$0.00 22. Security deposits and prepayments \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 23. **Annuities** \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Interest in a qualified education fund, 24. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 such as an education IRA 25. Trusts, equitable or future interests in \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 property

IN RE: Christian Hernandez CASE NO

CHAPTER 13

Scheme Selected: Federal

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

**Total Total Amount Total Amount** Gross No. Category **Property Value Encumbrances Total Equity** Exempt Non-Exempt 26. Copyrights, trademarks, websites and \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 other intellectual property \$0.00 \$0.00 27. Licenses, Franchises, and other \$0.00 \$0.00 \$0.00 general intangibles \$0.00 28. Tax refunds \$0.00 \$0.00 \$0.00 \$0.00 29. \$0.00 \$0.00 \$0.00 \$0.00 Family support \$0.00 30. Other amounts owed to the debtor \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 31. Insurance policies \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 32. Interest in property from deceased \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 33. Claims against third parties \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 34. All other claims, includes \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 contingent/unliquidated claims, counter claims, and creditor set offs 35. Other financial asset \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 38. Accounts receivable \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 39. Office equipment, furnishings, and \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 supplies 40. Machinery, fixtures and equipment \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 41. Inventory Interests in partnerships or joint 42. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 ventures 43. Customer lists \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 44. Other businessrelated property \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 47. Farm animals \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 48. Crops \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 49. Equipment 50. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Supplies \$0.00 Other farm or fishing related property \$0.00 \$0.00 \$0.00 \$0.00 51.

IN RE: Christian Hernandez CASE NO

CHAPTER 13

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$35.607.60	\$0.00	\$35.607.60	\$35.607.60	\$0.00

IN RE: Christian Hernandez CASE NO

CHAPTER 13

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

### **Surrendered Property:**

The following property is to be surrendered by the debtor. All purposes of this applying. The below listed items are to be re-			s NOT considered	l "non-exempt" for
purposes of this analysis. The below listed items are to be re-		rket Value	Lien	Equity
Real Property				
(None)				
Personal Property				
(None)				
TOTALS:		\$0.00	\$0.00	\$0.00
Non-exempt Property by Item:				
The following property, or a portion thereof, is non-exempt.				
Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				
Personal Property				
(None)				
TOTALS:	\$35,607.60	\$0.00	\$35,607.60	\$0.00

IN RE: Christian Hernandez CASE NO

CHAPTER 13

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #4

Summary	
A. Gross Property Value (not including surrendered property)	\$35,607.60
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$35,607.60
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$0.00
G. Total Equity (not including surrendered property) / (A-D)	\$35,607.60
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$35,607.60
J. Total Exemptions Claimed (Wild Card Used: \$398.00, Available: \$15,027.00)	\$35,607.60
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

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			D	ocument Pa	age 36 of 9	1		
Fill in this inform	nation to identify y	our case:						
Debtor 1	Christian			Hernandez				
	First Name	Middle	Name	Last Name				
Debtor 2								
(Spouse, if filing)	First Name	Middle	Name	Last Name				
		•	Norther	rn District o	f Texas			
United States E	Bankruptcy Court	for the:	Norther	<u> </u>	lexas	<del></del>		
Case number (	if						☐ Chack i	f this is an
known)							amende	
Official Forr	m 106D							
							_	
Schedu	le D: Cr	editors	s Who	Have Cla	ims Sec	ured by	Property	12/15
Be as complete	and accurate as	possible. If tw	vo married p	eople are filing toge	ther, both are equ	ually responsible f	or supplying correct inf	formation. If
•			ge, fill it out	, number the entries	, and attach it to	this form. On the t	op of any additional pag	ges, write your
	number (if knowi	•		. •				
•	litors have claim	-		•				
	ck this box and su in all of the inform		to the court v	with your other schedu	lles. You have noth	ning else to report o	n this form.	
Yes. Fill	in all of the inform	ation below.						
Part 1:	_ist All Secure	d Claims						
2. List all sec	ured eleime If o	araditar baa m	oro than and	e secured claim, list the	o oroditor	Column A	Column B	Column C
				a particular claim, list		Amount of claim	Value of collateral	Unsecured
creditors in	Part 2. As much			in alphabetical order a		Do not deduct the	that supports this	portion
creditor's na	ame.					value of collateral.	claim	If any
2.1 Resource	e One Credit U	Jnion	Describe th	he property that secu	res the claim:	\$17,048.00	\$12,093.00	\$4,955.00
Creditor's I	Name		0000 Kin	Const		$\neg$		<del></del>
Po Box	790408		2020 Kia		ation.			
Number	Street		Deptor's ma	ain source of transporta	ition.			
			As of the d	late you file, the clair	n is: Check all tha	t apply.		
Saint I o	uis, MO 63179		Conting	,				
City	State	ZIP Code	Unliquid					
- ,			Dispute					
	s the debt? Chec	k one.		ien. Check all that app	•			
☑ Debtor	•		-	eement you made (suc		secured car loan)		
Debtor	•			ry lien (such as tax lien	, mechanic's lien)			
_	1 and Debtor 2 c	,		ent lien from a lawsuit				
At leas	st one of the debto er	ors and	✓ Other (i offset)	including a right to	Certificate o	f Title		
	if this claim relaunity debt	ates to a						
Date debt	was incurred	4/1/2020	Last 4 digit	ts of account numbe	r 0 1 4	6		

\$17,048.00

Add the dollar value of your entries in Column A on this page. Write that number here:

				Do	ocument	Pag	e 37 of	91			
Fill i	n this inform	nation to identify	your case:								
-		<b>6</b> 1 1 41									
Del	btor 1	Christian	N4:-L-II- NI-		Hernand						
		First Name	Middle Na	ame	Last Name						
	btor 2										
(Sp	ouse, if filing)	First Name	Middle Na	ame	Last Name						
Uni	ited States E	Bankruptcy Cou	ırt for the:	Northern	n 🗀	District of	Texas				
		' '									
	se number nown)	-				<del></del>				☐ Check if	this is an
`	- ,									amende	d filing
Offi	cial Forr	m 106E/F									
			0	\ \ / I -					•		
SC	nedu	Ie E/F:	Creditor	s wn	о наv	e un	secur	ed Cla	ıms		12/15
Be as	complete	and accurate a	as possible. Use P	Part 1 for cr	editors with	PRIORITY	claims and	Part 2 for cree	ditors with NON	PRIORITY clair	ms. List the
	•		ontracts or unexp								
	,		e G: Executory Co		•	•		,	•	•	•
			lule D: Creditors V				•	•	• •		•
	per the entr per (if know		es on the left. Atta	cn the Con	itinuation Pa	ge to this p	page. On the	e top of any ac	aditional pages,	write your nan	ne and case
Pa	art 1:	List All of Yo	ur PRIORITY Ur	nsecured	Claims						
1.	Do any cre	editors have pr	riority unsecured	claims agai	inst you?						
	☐ No. Go	to Part 2.		_							
	✓ Yes.										
_		,		16 17				1 1 2 12 4 4			
2.			nsecured claims. If type of claim it is. If			•	•		•	•	
			sible, list the claims								
	fill out the C	Continuation Pa	ige of Part 1. If mor	e than one	creditor holds	a particula	ır claim, list tl	he other credito	ors in Part 3.		
	(For an exp	planation of eac	h type of claim, see	e the instruc	tions for this	form in the	instruction b	ooklet.)			
								,	Total claim	Priority	Nonpriority
									Total Claim	amount	amount
2.1	l <b></b>			1 4 4 4 4 1	.:t <b>f</b>				<b>***</b> ****	<b>***</b>	40.00
	Allilland	I Law Firm, P	LLC	Last 4 dig	jits of accou	nt number			\$3,081.00	\$3,081.00	\$0.00
	•	editor's Name		When was	s the debt in	curred?					
		ort Fwy Ste	401								
	Number	Street									
					date you file	, the claim	is: Check a	II that apply.			
	Hurst, T	X 76054-3264	4	Contin	-						
	City	State	ZIP Code	Unliqu							
	Who incu	rred the debt?	Check one.	☐ Disput	. <del>c</del> u						
	<b>☑</b> Debtoi		-	Type of P	RIORITY uns	secured cla	aim:				
	☐ Debtoi			☐ Domes	stic support o	bligations					
		r 1 and Debtor 2	2 only		and certain o			-			
			btors and another					u were intoxica	ated		
		t if this claim is	s for a	✓ Other.	Specify Att	orney Fe	es				
	comm	unity debt				·					

✓ No ☐ Yes

Is the claim subject to offset?

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Debtor 1	Christian		Hernand	lez Case nu	ımber (	if kno	wn)			
	First Name	Middle Name	Last Name		,					
Part 2:	List All of Your	· NONPRIORITY Uns	secured Clai	ms						
3. Do any	creditors have non	priority unsecured cla	ims against ye	ou?						
☐ No. ☑ Yes	•	report in this part. Subm	nit this form to t	he court with your other schedu	ules.					
nonprio included	rity unsecured claim,	list the creditor separate an one creditor holds a	ely for each cla	al order of the creditor who him. For each claim listed, identi, list the other creditors in Part	ify wha	at type	e of cla	aim it is. Do r	not list claims already	
									Total claim	
4.1 Affirm	n. Inc.		Last	4 digits of account number	R	Α	R	4	\$1,357.00	
	ority Creditor's Name							<del>-</del>	<u> </u>	
650 C	650 California St FI 12			n was the debt incurred?		5/1/	/2022			
Numbe	er Street									
				As of the date you file, the claim is: Check all that apply.						
San F	rancisco, CA 941	08-2716		Contingent						
City	Sta	te ZIP	Code	Inliquidated Disputed						
Who in	ncurred the debt? C	heck one.		risputeu						
<b>₫</b> Deb	btor 1 only		Туре	Type of NONPRIORITY unsecured claim:  Student loans						
☐ Det	btor 2 only		= -							
_	btor 1 and Debtor 2 o	•		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>						
	least one of the debto									
☐ Che	eck if this claim is f	or a community debt	<b>4</b>	Other. Specify Charge Acco	unt					
Is the o	claim subject to offs	set?								
<b>☑</b> No										
☐ Yes	3									
4.2 Avant	t / Webbank		Last	4 digits of account number	8	7	4	3	\$13,183.35	
Nonprio	ority Creditor's Name					_		_		
Attn:	Bankruptcy		wne	n was the debt incurred?						
222 N	I LaSalle St, Ste 1	700								
Numbe				f the date you file, the claim i	is: Che	ck al	I that a	pply.		
Chica	ago, IL 60601			Contingent Inliquidated						
City	Sta	te ZIP		Pisputed						
Who in	ncurred the debt? C	heck one		•						
	btor 1 only	nook ono.		of NONPRIORITY unsecured	d claim	1:				
	btor 2 only			tudent loans						
	btor 1 and Debtor 2 o	nly		Obligations arising out of a separiority claims	aration	agree	ement	or divorce th	at you did not report as	
	least one of the debto		<u></u>	priority claims  Debts to pension or profit-sharing plans, and other similar debts					S	
☐ Che	eck if this claim is fo	or a community debt	<b>4</b>	Other. Specify Note Loan						
Is the o	claim subject to offs	set?								
<b>☑</b> No										

☐ Yes

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Debtor 1 Christian Hernandez Case number (if known)

Last Name

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **Capital One** Last 4 digits of account number \$474.00 Nonpriority Creditor's Name When was the debt incurred? 9/1/2021 by American InfoSource as Agent PO Box 71083 As of the date you file, the claim is: Check all that apply. Number Street Contingent Charlotte, NC 28272 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **√** No ☐ Yes 4.4 Conn's HomePlus Last 4 digits of account number 5 3 7 1 \$1,296.00 Nonpriority Creditor's Name When was the debt incurred? 11/1/2018 2445 Technology Forest Boulevard Building 4, Suite 800 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated The Woodlands, TX 77381 Disputed ZIP Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Obligations arising out of a separation agreement or divorce that you did not report as Debtor 2 only priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ■ At least one of the debtors and another ☑ Other. Specify Signature Loan ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No Yes

First Name

Middle Name

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Christian Hernandez Page 40 of 91
Case number (if known)

Last Name

Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim First National Bank/Legacy Last 4 digits of account number \$489.00 8 3 9 Nonpriority Creditor's Name When was the debt incurred? 9/1/2021 Attn: Bankruptcy PO Box 5097 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117-5097 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **√** No ☐ Yes 4.6 First Savings Bank Last 4 digits of account number 6 4 5 \$492.00 Nonpriority Creditor's Name When was the debt incurred? 9/1/2021 Attn: Bankruptcy PO Box 5019 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset?

✓ No ☐ Yes

Debtor 1

First Name

Last Name

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Christian Hernandez Case nu

Middle Name

Case number (if known)

Pa	rt 2: Your NONPRIORITY Unsecured Claims	— Continuation Page						
After	listing any entries on this page, number them beginn	ing with 4.4, followed by 4.5, and so forth	•	Total claim				
4.7	Fnb Omaha	Last 4 digits of account number	2 5 1 2	\$730.00				
	Nonpriority Creditor's Name							
	Attn: Bankruptcy	When was the debt incurred?	1/1/2019					
	PO Box 2490	<del>_</del>						
	Number Street	<ul> <li>As of the date you file, the claim is: C</li> </ul>	Check all that apply.					
	Omaha, NE 68103	Contingent						
	City State ZIP Code	Unliquidated						
	,	Disputed						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured cla	aim:					
	Debtor 1 only	☐ Student loans						
	Debtor 2 only	<ul><li>Obligations arising out of a separation</li></ul>	on agreement or divorce that you did r	not report as				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims		·				
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing pl	ans, and other similar debts					
	Check if this claim is for a community dept	☑ Other. Specify CreditCard						
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							
4.8	Fst Premier	Last 4 digits of account number	1 5 2 4	\$1,199.00				
	Nonpriority Creditor's Name							
	601 S Minneapolis Ave	When was the debt incurred?	1/31/2020					
	Number Street	<del>_</del>						
		As of the date you file, the claim is: Check all that apply.						
	Sioux Falls, SD 57104	☐ Contingent						
	City State ZIP Code	<ul> <li>Unliquidated</li> </ul>						
	•	☐ Disputed						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured cla	aim:					
	Debtor 1 only	☐ Student loans	4111.					
	Debtor 2 only	<ul><li>Obligations arising out of a separation</li></ul>	on agreement or divorce that you did r	not report as				
	Debtor 1 and Debtor 2 only	priority claims	on agreement of alverse that you did i	iot report as				
	At least one of the debtors and another	Debts to pension or profit-sharing pl	ans, and other similar debts					
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard						
	Is the claim subject to offset?							
	☑ No							
	Yes							

Debtor 1

First Name

Debtor 1 Christian Document Page 42 of 91

Hernandez Case number (if known)

Last Name

Pa	Your NONPRIORITY Unsecured Claims —	- Continuation Page						
After	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so forth.	Total claim					
4.9	Fst Premier	Last 4 digits of account number 2 8 0 1	\$1,036.00					
	Nonpriority Creditor's Name	When we the debt in some 10						
	601 S Minneapolis Ave	When was the debt incurred? 2/9/2022						
	Number Street	_						
		As of the date you file, the claim is: Check all that apply.						
	Sioux Falls, SD 57104	□ Contingent						
	City State ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>						
	Who incurred the debt? Check one.	☐ Disputed						
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	☐ Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as						
	At least one of the debtors and another	priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard						
	☐ Check if this claim is for a community debt							
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							
4.10	Gloria Gallego Winslow	Last 4 digits of account number \$1,400.00						
	Nonpriority Creditor's Name	<u> </u>						
	2190 S Uecker Ln	When was the debt incurred?						
	Number Street	As of the date you file, the claim is: Check all that apply.						
	Lewisville, TX 75067-7801	□ Contingent □ Unliquidated						
	City State ZIP Code	☐ Disputed						
	Who incurred the debt? Check one.	- Diopaled						
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	☐ Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as						
	☐ At least one of the debtors and another	priority claims  Debts to pension or profit-sharing plans, and other similar debts						
	☐ Check if this claim is for a community debt	✓ Other. Specify Personal Loan						
	Is the claim subject to offset?	_						
	<b>☑</b> No							
	□ Voc							

First Name

Middle Name

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Christian Hernandez Case number (if known) \_\_\_

Last Name

Middle Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	- Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim				
4.11	Lvnv Funding/Resurgent Capital	Last 4 digits of account number 8 7 4 3	\$7,019.00				
	Nonpriority Creditor's Name	When was the debt incurred? 4/1/2023					
	Attn: Bankruptcy	When was the debt incurred? 4/1/2023					
	PO Box 10497						
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Greenville, SC 29603	☐ Contingent - ☐ Unliquidated					
	City State ZIP Code	□ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	Debtor 1 only	☐ Student loans					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did no	t report as				
	☐ At least one of the debtors and another	priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collecting For -AVANT WEBBANK					
	☐ Check if this claim is for a community debt						
	In the eleim publicat to effect?	Collecting For -AVAINT WEBBAIN					
	Is the claim subject to offset?  ✓ No						
	☑ Yes						
4.12							
7.12	Mission Lane LLC	Last 4 digits of account number 3 7 5 7	\$571.00				
	Nonpriority Creditor's Name	When was the debt incurred? 10/1/2021					
	Attn: Bankruptcy	<u></u>					
	Po Box 105286	As of the date you file, the claim is: Check all that apply.					
	Number Street	Contingent					
	Atlanta, GA 30348	- Unliquidated					
	City State ZIP Code	☐ Disputed					
	Who incurred the debt? Check one.	Type of NONDRIORITY unconvend eleims					
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:  Student loans					
	Debtor 2 only	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that you did no</li></ul>	t renort as				
	Debtor 1 and Debtor 2 only	priority claims	r report as				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard					
	Is the claim subject to offset?						
	☑ No						
	Yes						

Debtor 1

First Name

Last Name

Case number (if known) \_

Debtor 1 Christian Document Page 44 of 91

Hernandez Case nu

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.13 MoneyLion, Inc Last 4 digits of account number 9 2 7 \$641.00 Nonpriority Creditor's Name When was the debt incurred? 5/1/2023 Attn: Bankruptcy Dept P.O. Box 1547 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sandy, UT 84091-1547 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify PartiallySecured Is the claim subject to offset? **√** No ☐ Yes 4.14 **NCB Management Services** Last 4 digits of account number 4 8 9 \$7,450.00 Nonpriority Creditor's Name When was the debt incurred? 1/24/2024 Attn: Manager/Attn Officer P.O. Box 1099 As of the date you file, the claim is: Check all that apply. Number Street Contingent Langhorne, PA 19047 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Collecting For -REPUBLIC BANK TRUST CO Is the claim subject to offset? **☑** No ☐ Yes

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Christian Hernandez Page 45 of 91

Case number (if known)

Last Name

Middle Name

Pa	Your NONPRIORITY Unsecured Claims —	Continuation Page					
Afte	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim				
4.15	Nebraska Furniture Mart  Nonpriority Creditor's Name  Bankruptcy  PO Box 2335  Number Street  Omaha, NE 68103  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?	with 4.4, followed by 4.5, and so forth.  Last 4 digits of account number 0 R E V  When was the debt incurred? 11/1/2016  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not priority claims □ Debts to pension or profit-sharing plans, and other similar debts  ☑ Other. Specify ChargeAccount	\$1,746.00				
4.16	✓ No ☐ Yes  Nordstrom FSB Nonpriority Creditor's Name	Last 4 digits of account number 4 2 2 6 \$780.00  When was the debt incurred? 1/1/2019  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed					
	P.O. Box 6555  Number Street  Englewood, CO 80155  City State ZIP Code						
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	t report as				

Debtor 1

First Name

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Debtor 1 Christian Hernandez Case number (if known)

Last Name

		NONPRIORITY Unse								
Afte	r listing any entri	ies on this page, numb	er them beginnin	ng with 4.4, followed by 4.5, and so fo	orth.	Total claim				
4.17	Oportun Nonpriority Creditor's Name P.O. Box 2063 Number Street			Last 4 digits of account number	1 7 5 6	\$1,196.00				
					4/4/0000					
				When was the debt incurred?	1/1/2023					
				-						
				As of the date you file, the claim is	: Check all that apply.					
	Menlo Park, C	:A 94026		☐ Contingent						
	City State ZIP Code  Who incurred the debt? Check one.			<ul><li>Unliquidated</li><li>Disputed</li></ul>						
				<del>-</del> ,						
	☑ Debtor 1 only	1		Type of NONPRIORITY unsecured claim:						
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No □ Yes			☐ Student loans						
				Obligations arising out of a separation agreement or divorce that you did not report as						
				priority claims  Debts to pension or profit-sharing plans, and other similar debts						
				✓ Other. Specify Signature Loan						
4.18				Last 4 digits of account number	\$13,719.00					
	Nonpriority Credit	tor's Name		-						
	Attn: Bankrup	otcy Attn: Bankruptc	у	When was the debt incurred?						
	180 Miaden La	ane , Ste 2801		-						
	Number	Street		As of the date you file, the claim is	: Check all that apply.					
	New York, NY	10038		☐ Contingent						
	City	State	ZIP Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>						
	Debtor 1 only Debtor 2 only Debtor 1 and At least one of	Debtor 2 only of the debtors and another claim is for a commun		Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a separ priority claims ☐ Debts to pension or profit-sharing ☑ Other. Specify Signature Loa	ration agreement or divorce that yo	ou did not report as				

First Name

Middle Name

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	rt 2: Your NONPRIORITY Unsecured Claims - listing any entries on this page, number them beginning		rth					Total claim
	insuing any entries on this page, number them beginning	ig with 4.4, followed by 4.5, and so fol	rui.					Total Claim
4.19	Republic Finance Llc	Last 4 digits of account number	2	3	3	0	1	\$1,012.00
	Nonpriority Creditor's Name	When was the debt incurred?		4.	4 I4 I	204	•	
	7031 Commerce Cir.	when was the debt incurred?		1	1/1/.	201	9	
	Number Street	_						
		As of the date you file, the claim is	: Che	eck	call	that	apply.	
	Baton Rouge, LA 70809	☐ Contingent						
		■ ∏ Unliquidated						
	City State ZIP Code							
	Who incurred the debt? Check one.							
	☑ Debtor 1 only							
	☐ Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only							
	At least one of the debtors and another							
	☐ Check if this claim is for a community debt							
	In the element in the effect O	Note Coali						
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							
4.20	Resource One Credit Union	Last 4 digits of account number	0	1	1	4	7	\$4,811.00
	Nonpriority Creditor's Name							
	Po Box 790408	When was the debt incurred?		9	)/1/2	2021		
	Number Street	_						
		As of the date you file, the claim is: Check all that apply.						
	Caint Lauria MO 02470	☐ Contingent						
	Saint Louis, MO 63179	─ ☐ Unliquidated						
	City State ZIP Code	☐ Disputed						
	Who incurred the debt? Check one.							
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	clain	n:				
	Debtor 2 only	☐ Student loans						
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separ	ation	ag	greei	men	t or divorce	that you did not report as
	☐ At least one of the debtors and another	priority claims  Debts to pension or profit-sharing	n nlan	20	and	othe	ar eimilar de	obte
	☐ Check if this claim is for a community debt	✓ Other. Specify Signature Loa		13,	anu	Oure	si siiriilai de	5013
	Is the claim subject to offset?	. ,						
	<b>☑</b> No							
	☐ Yes							

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The Voom Group	Last 4 digits of account number \$16,000.
Nonpriority Creditor's Name  1825 E Plano Pkwy	Last 4 digits of account number
Number Street	As of the date you file, the claim is: Check all that apply.
Plano, TX 75074-8502	☐ Unliquidated
City State ZIP Code	☐ Disputed
Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Personal Loan

Debtor 1

Part 4:

Christian

6g.

6h.

6i.

6j.

similar debts

Write that amount here.

Total. Add lines 6f through 6i.

Hernandez

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Case number (if known) \_

\$0.00

\$0.00

\$76,601.35

\$76,601.35

First Name Middle Name Last Name

Add the Amounts for Each Type of Unsecured Claim

Obligations arising out of a separation agreement or

divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other

Other. Add all other nonpriority unsecured claims.

#### Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$3,081.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$3,081.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2

6g.

6h.

6i.

6j.

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Fill in this informatio	n to identify your case	:			
Debtor 1	Christian		Hernandez		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bank	ruptcy Court for the:	No	orthern District of Texa	<u>s</u>	
Case number					Check if t
(if known)					amended

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	S2 Montfort LP  Name  14332 Montfort Dr  Number Street  Dallas, TX 75254  City State ZIP Code	Residential Lease Contract to be ASSUMED
2.2	Spectrum Name PO Box 38250 Number Street Charlotte, NC 28278 City State ZIP Code	Cell Phone Service Contract Contract to be ASSUMED
2.3	Name  Number Street  City State ZIP Code	
2.4	Name  Number Street  City State ZIP Code	

			Document	Page	51 of 91	_	
Fill in this	information to identify yo	our case:					
Debtor 1	Christian		Hernandez				
	First Name	Middle Name	Last Name				
Debtor 2	2						
(Spouse,	if filing) First Name	Middle Name	Last Name				
United S	States Bankruptcy Court f	for the: North	ern Dist	rict of	Texas		
Case nu		-					
(if known)							Check if this is an amended filing
00000	E 400U					<u> </u>	amended illing
Official	Form 106H						
Sche	edule H: Yo	ur Codebto	rs				12/15
known). A	nswer every question.					l Pages, write your name	e and case number (if
	•	rs? (If you are filing a joir	nt case, do not list e	either spous	se as a codebtor.)		
_	No Yes						
_							
		i <b>ve you lived in a comm</b> , Nevada, New Mexico, F				operty states and territorie	s include Arizona,
	No. Go to line 3.	,	, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,		
<b>⊴</b>	Yes. Did your spouse, for	ormer spouse, or legal eq	uivalent live with yo	ou at the tir	ne?		
	☐ No						
	✓ Yes. In which comm	unity state or territory did	you live?	Texas	Fill in th	e name and current addre	ess of that person.
	Rosa Santos, Jo	orge Emilio					
	Name of your spous	se, former spouse, or leg	al equivalent				
	Last Known						
	Number	Street					
	City	State	ZIF	P Code			
2 a	gain as a codebtor only	y if that person is a gua	rantor or cosigne	r. Make su	e you have listed th	is filing with you. List the ne creditor on <i>Schedule</i> lule E/F, or <i>Schedule G</i> t	D (Official Form 106D),
Co	lumn 1: Your codebtor				Column 2:	The creditor to whom ye	ou owe the debt
					Check all s	schedules that apply:	
3.1							
Na	me				☐ Schedu	ule D, line	_

ZIP Code

ZIP Code

Number

City

Name

Number

City

3.2

Street

Street

State

State

☐ Schedule E/F, line \_\_\_

☐ Schedule G, line \_\_\_

☐ Schedule D, line \_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

			Docu	ment Page 52 of 9:	1
Fill	in this information to	o identify your ca	se:		
D	ebtor 1	Christian	He	rnandez	
		First Name		Name	
	ebtor 2				0. 1.741
(S	pouse, if filing)	First Name	Middle Name Last	Name	Check if this is:  An amended filing
U	nited States Bankru	otcy Court for the	Northern	District of Texas	A supplement showing postpetition
_	ase number				chapter 13 income as of the following date
(11	KIIOWII)				
<b>~</b> ¹	<b>6</b> : -: - 1	4001			WINT BB / TTTT
<u>Ot</u>	ficial Form	1061			
Sc	chedule I:	Your Ind	come		12/15
	rt 1: Describe E				
	information.			Debtor 1	Debtor 2 or non-filing spouse
	If you have more th	•	Employment status	<b>☑</b> Employed □ Not Employed	d Employed Not Employed
	attach a separate prinformation about a employers.	•	Occupation	Manager	
	Include part time, s	easonal or	Employer's name	The Voom Group, Inc	
	self-employed work	· ·	Employer's address	1925 E Diana Barkway Su	ita 250
	Occupation may in or homemaker, if it			1825 E Plano Parkway Su Number Street	Number Street
				Plano, TX 75074	
				City State	Zip Code City State Zip Code
			How long employed there?	8 years 11 months	<del></del>
Pa	rt 2: Give Detai	ls About Mont	hly Income		
		:	date you file this form If w	ou have nothing to report for any	y line, write \$0 in the space. Include your non-filing spouse
			date you me this form. If yo		
	unless you are sep If you or your non-f	arated. iling spouse have	e more than one employer, c	combine the information for all er	mployers for that person on the lines below. If you need
	unless you are sep	arated. iling spouse have	e more than one employer, c		Debtor 1 For Debtor 2 or
	unless you are sep If you or your non-f	arated. iling spouse have	e more than one employer, c		

\$6,250.01 \$0.00

deductions.) If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

\$6,250.01

\$0.00

\$0.00

\$0.00

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Debtor 1 Christian Hernandez Case number (if known)

Last Name

First Name

Middle Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$6,250.01	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$988.46	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$62.51	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$458.66	\$0.00	
	5e. Insurance	5e.	\$161.46	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify: See additional page	5h.	+ \$729.45	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$2,400.53	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,849.48	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$136.78	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.	<del></del>		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+ \$0.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$136.78	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$3,986.26	+ \$0.00	= \$3,986.26
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.			
	Include contributions from an unmarried partner, members of your househol friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that a	, ,		,	
	Specify:			_ 11. +	÷ \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics		•		\$3,986.26
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this found in the year after you file this year after you file this found in the year after you file this found in	orm?			-

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Debtor 1	Christian		Hernandez	Case number (if known)
	First Name	Middle Name	Last Name	
				Amount
	Deductions For Debto	or 1		
Loan I	Payment			\$729.4

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Debtor 1 Christian Hernandez Case number (if known) \_ First Name Middle Name Last Name 8a. Attached Statement **UBER - Business Income** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$513.12 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: 2. Ordinary and necessary expense \$134.33 Net Employee Payroll (Other than debtor) \$0.00 **Payroll Taxes** \$0.00 \$0.00 **Unemployment Taxes** 5. Worker's Compensation \$0.00 6. 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$37.00 12. Office Expenses and Supplies \$0.00 13. Repairs and Maintenance \$31.67 14. Vehicle Expenses \$0.00 15. Travel and Entertainment \$0.00 16. Equipment Rental and Leases \$0.00 17. Legal/Accounting/Other Professional Fees \$0.00 18. Insurance \$173.33 19. Employee Benefits (e.g., pension, medical, etc.) \$0.00

22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)
PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition

TOTAL PAYMENTS TO SECURED CREDITORS

**Business Debts** 

TOTAL OTHER EXPENSES

21. Other Expenses

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$136.78

\$0.00

\$0.00

\$376.33

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Fill in this information	n to identify your case:	:			
Debtor 1	Christian		Hernandez		Object Makes to
	First Name	Middle Name	Last Name		Check if this is:
Debtor 2					☐ An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		A supplement showing postpetition chapter 13 expenses as of the following date:
United States Bank	ruptcy Court for the:	No	orthern District of Texas	<u> </u>	
Case number (if known)					MM / DD / YYYY

### Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household	d		,	, , , , , , , , , , , , , , , , , , , ,
1. Is this a joint case?				
No. Go to line 2.				
Yes. Does Debtor 2 live in a sep	parate household?			
_	Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?	<b>☑</b> No	Coparato Frodeonera el 2001el 21		
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	·			No. Yes.
				No. Yes.
				No. Yes.
				. No. Yes.
				No. Yes.
Do your expenses include     expenses of people other than     yourself and your dependents?	<b>☑</b> No □ Yes			
Part 2: Estimate Your Ongoing N	Monthly Expenses			
Estimate your expenses as of your bar date after the bankruptcy is filed. If this				
Include expenses paid for with non-cas such assistance and have included it of			You	ur expenses
The rental or home ownership experior the ground or lot.	enses for your residence. Include f	irst mortgage payments and any rent	4	\$1,300.00
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or rent	ter's insurance		4b	\$5.00
4c. Home maintenance, repair, and	d upkeep expenses		4c	\$0.00
4d. Homeowner's association or co	ondominium dues		4d	\$0.00

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Debtor 1 Christian Hernandez Case number (if known)

Last Name

First Name

Middle Name

First Name Middle Name Last Name		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a	\$250.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$96.00
6d. Other. Specify:	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$650.00
3. Childcare and children's education costs	8	\$0.00
O. Clothing, laundry, and dry cleaning	9	\$50.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11	\$83.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12	\$292.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$0.00
4. Charitable contributions and religious donations	14	\$0.00
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance	15a.	\$0.00
	·	40.00
15b. Health insurance 15c. Vehicle insurance	15b 15c	\$0.00 \$0.00
	150	
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:		\$0.00
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18. <u> </u>	\$0.00
19. Other payments you make to support others who do not live with you.		
Specify:	19	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

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Debtor 1	Christian		Hernandez	Case number (if known	)
	First Name	Middle Name	Last Name	<u> </u>	,
21. <b>Other.</b> Sp	pecify: Pet Expen	nses	_	21. +	\$100.00
22. Calculate	e your monthly exp	penses.			
22a. Add	l lines 4 through 21.			22a	\$2,876.00
22b. Cop	y line 22 (monthly e	expenses for Debtor 2), i	f any, from Official Form 106J-2	22b	\$0.00
22c. Add	line 22a and 22b.	The result is your monthl	y expenses.	22c	\$2,876.00
23. Calculate	e your monthly net	income.			
23а. Сор	y line 12 (your com	bined monthly income) f	rom Schedule I.	23a	\$3,986.26
23b. Cop	y your monthly exp	enses from line 22c abo	ve.	23b	\$2,876.00
23c. Sub	tract your monthly	expenses from your mon	thly income.		
The	e result is your mon	thly net income.		23c	\$1,110.26
For exam	nple, do you expect	to finish paying for your	enses within the year after you file the car loan within the year or do you export a modification to the terms of your	pect your	

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Fill in this informatio	n to identify your case:			
Debtor 1	Christian		Hernandez	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	No	orthern District of Texas	
Case number (if known)				

#### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	**
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$47,700.60
1c. Copy line 63, Total of all property on Schedule A/B	\$47,700.60
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	4 4.4
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$17,048.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)      3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,081.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$76,601.35
Your total liabilities	\$96,730.35
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,986.26
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$2,876.00

Case 24-32536-swe13 Doc 1 Filed 08/24/24 Entered 08/24/24 15:10:35 Desc Main Page 60 of 91 Document Debtor 1 Christian Hernandez Case number (if known) -First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **✓** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,386.79 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00

9e.Obligations arising out of a separation agreement or divorce that you did not report as priority

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

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Fill in this information	to identify your case	:		
Debtor 1	Christian		Hernandez	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	No	orthern District of Texas	
Case number (if known)				

#### Official Form 106Dec

#### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorn	ney to help you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Variable   Variable	mary and schedules filed with this declaration and that they are true and correct.

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Fill in this informatio	n to identify your case	:	
Debtor 1	Christian		Hernandez
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	cruptcy Court for the:	No	orthern District of Texas
Case number (if known)			

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

<b>√</b> No	ears, have you lived anywhe				
Debtor 1:	io piaceo yea iivea iii ale lacc	Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
Number Street	State ZIP Code	From To 	Number Street  City	State ZIP Code	Same as Debtor 1 From To
Number Street		From To	Same as Debtor 1  Number Street		Same as Debtor 1 From To
Dity	State ZIP Code	_	City	State ZIP Code	-
rritories include Ariz	ears, did you ever live with a cona, California, Idaho, Louisi you fill out Schedule H: Your	ana, Nevada, New Mexico	, Puerto Rico, Texas, Wash		munity property states ai

Document Page 63 of 91 Hernandez Debtor 1 Christian Case number (if known) \_ First Name Last Name Middle Name Explain the Sources of Your Income Part 2: 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, commissions, Wages, commissions, From January 1 of current year until the \$49,476.99 bonuses, tips bonuses, tips date you filed for bankruptcy: ✓ Operating a business Operating a business \$3,578.69 ✓ Wages, commissions, ■ Wages, commissions, For last calendar year: \$73,026.00 bonuses, tips bonuses, tips (January 1 to December 31, 2023 ✓ Operating a business Operating a business \$1,749.00 ✓ Wages, commissions, ■ Wages, commissions, For the calendar year before that: \$71,752.00 bonuses, tips bonuses, tips (January 1 to December 31, 2022 ✓ Operating a business Operating a business \$5,513.00 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2023 For the calendar year before that: Pension \$15,865.00 (January 1 to December 31, 2022

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Case 24-32536-swe13

First Name Certain F	Middle Name	Hernand	lez	Case	number <i>(ii</i>	f known)
Certain F		Last Name		_	(	,
	Payments You Made	Before You Filed	d for Bankruptcy			
ebtor 1's o	or Debtor 2's debts prima	rily consumer debt	s?			
	tor 1 nor Debtor 2 has popular primarily for a personal,			ts are defined in 11 U.S	S.C. § 101	(8) as "incurred by
	0 days before you filed for	<b>3</b> ,		total of \$7,575* or more	e?	
No. Go to	line 7.					
_ pa	id that creditor. Do not in	clude payments for	domestic support obl			
Subject to a	adjustment on 4/01/25 ar	nd every 3 years after	er that for cases filed	on or after the date of	adjustmer	nt.
uring the 90 No. Go to Yes. Lis	O days before you filed for line 7.	or bankruptcy, did yo whom you paid a to	ou pay any creditor a detail of \$600 or more a	nd the total amount you		
		otcy case.		. ,		Was this payment for
		payment	,	,		The and payment of
Resource One Credit Union		07/01/2024	\$1,072.	.68 \$17,	048.00	Mortgage
		06/01/2024				<b>√</b> Car
		-	_			Credit card
int Louis	, MO 63179	<u> </u>	_			☐ Loan repayment ☐ Suppliers or vendors
	State ZIP Code					
						Other —
de your rela icer, directo sole proprie	tives; any general partne or, person in control, or o	ers; relatives of any wner of 20% or mor	general partners; part	nerships of which you rities; and any managir	are a gen ng agent, i	eral partner; corporations of vincluding one for a business y
		Dates of payment	Total amount paid	Amount you still owe	Reasor	n for this payment
		2023-2024	\$6,300.00	\$1,400.00	Persor	nal loan
illego Win	slow					
	nslow					
	painor Subject to a subject to a subject to a suring the 90 No. Go to Yes. Lis inc an source O litor's Name Box 790 ber Stre int Louis ar before y e your rela cer, directo ole propriet	paid that creditor. Do not in not include payments to an Subject to adjustment on 4/01/25 and Subject to adjustment of the subject of the subje	paid that creditor. Do not include payments for not include payments to an attorney for this bate subject to adjustment on 4/01/25 and every 3 years after to adjustment on 4/01/25 and every 3 years after to adjustment on 4/01/25 and every 3 years after to adjust the subject to adjustment on 4/01/25 and every 3 years after the subject to adjustment on 4/01/25 and every 3 years after the subject to adjustment of the subj	paid that creditor. Do not include payments for domestic support oblinot include payments to an attorney for this bankruptcy case.  Subject to adjustment on 4/01/25 and every 3 years after that for cases filed sebtor 1 or Debtor 2 or both have primarily consumer debts.  Jaring the 90 days before you filed for bankruptcy, did you pay any creditor a find the 90 days before you filed for bankruptcy, did you pay any creditor a find the 90 days before you filed for bankruptcy, did you pay any creditor a find you pay any creditor a fi	paid that creditor. Do not include payments for domestic support obligations, such as child not include payments to an attorney for this bankruptcy case.  Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of sector 1 or Debtor 2 or both have primarily consumer debts.  Juring the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Jes. List below each creditor to whom you paid a total of \$600 or more and the total amount you include payments for domestic support obligations, such as child support and alimony. Also an attorney for this bankruptcy case.  Dates of payment  Source One Credit Union  O7/01/2024  State ZIP Code  Defort you filed for bankruptcy, did you make a payment on a debt you owed anyone who was a your relatives; any general partners; relatives of any general partners; partnerships of which you care, director, person in control, or owner of 20% or more of their voting securities; and any managin olde proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child so the proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child so the payment of their voting securities; and any managin olde proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child so the payments for domestic support obligations, such as child so the payments for domestic support obligations, such as child so the payments for domestic support obligations, such as child so the payments for domestic support obligations, such as child so the payments for domestic support obligations, such as child so the payment of the	paid that creditor. Do not include payments for domestic support obligations, such as child support a not include payments to an attorney for this bankruptcy case.  Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment of adjustment of the date

Document Page 65 of 91 Debtor 1 Christian Hernandez Case number (if known) \_ First Name Middle Name Last Name Dates of Total amount paid Amount you still Reason for this payment payment Include creditor's name Insider's Name Number City State ZIP Code Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **√** No Yes. Fill in the details. Nature of the case Status of the case Court or agency Pending Case title \_\_\_\_\_ On appeal Court Name ☐ Concluded Number Street Case number \_\_\_ City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ✓ No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name **Explain what happened** Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. State ZIP Code City

Document Page 66 of 91 Debtor 1 Christian Hernandez Case number (if known) \_ First Name Middle Name Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **√** No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken Creditor's Name Number Street ZIP Code City State Last 4 digits of account number: XXXX-\_\_\_\_\_\_\_\_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **✓** No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number City State ZIP Code Person's relationship to you \_ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No ☐ Yes. Fill in the details for each gift or contribution.

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ebtor 1	Christian	Hernandez		Case number (if kno	wn)
	First Name M	iddle Name Last Name		,	,
DECAF		Description and value of any property	r transferred	Date payment or transfer was made	Amount of payment
	no Was Paid	Credit Counseling Course			
114 Go	liad Street			06/25/2024	\$15.00
Number	Street				
Fort We	orth, TX 76126				
City	State ZIP Cod	e			
Email or w	ebsite address				
Person Wh	no Made the Payment, if Not Yo	ou			
□No	ude any payment or transfe	r that you listed on line 16.			
Nationa	al Debt Relief	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
Person Wh	no Was Paid	Debt settlement services.			
11 Bros	adway Suite 1600			2023-2024	\$2,500.00
Number	Street				
New Yo	ork, NY 10004				
City	State ZIP Cod	е			
ordinary conclude both Do not include	purse of your business or the outright transfers and tranude gifts and transfers that	r bankruptcy, did you sell, trade, or otherwis financial affairs? nsfers made as security (such as the granting you have already listed on this statement.			
Yes. F	ill in the details.				
		Description and value of property transferred		perty or payments paid in exchange	Date transfer was made
Person Wh	no Received Transfer				
Number	Street				
City	State ZIP Cod				
Person's	relationship to you	<u> </u>			

tor 1	Christian	200		Page 69 of 91	24/24 15:10:35 [  Case number (if known) _	
	First Name	Middle Name	Last Name			
hese are o ✓ No	often called asset-pr		d you transfer any pro	perty to a self-settled trust	or similar device of which	n you are a beneficia
☐ Yes. Fi	ill in the details.					
		Description	and value of the prop	perty transferred		Date transfer was made
Name of t	rust					
. Within 1 transferre	year before you file ed? cking, savings, mone	ed for bankruptcy, were	e any financial account	osit Boxes, and Storag ts or instruments held in youtes of deposit; shares in ba	our name, or for your bene	
<b>√</b> No						
Yes. Fi	ill in the details.					
		Last 4 digi	ts of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance r before closing o transfer
	nancial Institution			Checking		
Name of Fi	nancial institution	XXXX		Savings		
	Street			☐ Money market ☐ Brokerage		
				☐ Money market		
Name of Fi	Street	XXXX		☐ Money market ☐ Brokerage		
Number  City  Do you I luables?	Street State Z	IP Code	efore you filed for bank	☐ Money market ☐ Brokerage	ox or other depository for	securities, cash, o
Number  City  Do you I luables?	State Z	UP Code u have within 1 year be	efore you filed for bank	☐ Money market ☐ Brokerage ☐ Other		Do you still have it?
Number  Do you i luables?  No  Yes. Fi	State Z	UP Code u have within 1 year be		☐ Money market ☐ Brokerage ☐ Other  kruptcy, any safe deposit b		Do you still have
Number  Do you i luables?  No Yes. Fi	State Z	u have within 1 year be		☐ Money market ☐ Brokerage ☐ Other  kruptcy, any safe deposit b		Do you still have it?
Do you i uables? No Yes. Fi	Street  State Z  now have, or did yo  ill in the details.	UP Code  u have within 1 year be  Who else	had access to it?	Money market Brokerage Other  Cruptcy, any safe deposit b		Do you still have it?

Page 70 of 91 Document Debtor 1 Christian Hernandez Case number (if known). First Name Middle Name Last Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **✓** No Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ■ No Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code ZIP Code City State Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **√**No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Number Street City State **ZIP Code** City State **ZIP Code** Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details.

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btor 1	Christian		Hernandez	Case number (if kn	own)
	First Name	Middle Name	Last Name		·
		Governm	ental unit	Environmental law, if you know it	Date of notice
Name of s	site	Governmen	tal unit	-	
Number	Street	Number	Street		
		City	State ZIP Code	_	
City	State ZIP	Code			
<b>5. Have y</b> o <b>√</b> 1 No	ou notified any governi	mental unit of any r	elease of hazardous ma	terial?	
Yes. F	Fill in the details.				
		Governm	ental unit	Environmental law, if you know it	Date of notice
				_	
Name of s	site	Governmen	tal unit		
Number	Street	Number	Street	_	
		City	State ZIP Code	_	
City	State ZIP	Code			
i. Have yo ✓ No	ou been a party in any	judicial or administ	rative proceeding under	any environmental law? Include settlements	and orders.
Yes. F	Fill in the details.				
		Court or	agency	Nature of the case	Status of the ca
Case title	e			_	Pending
		Court Name	•		☐On appeal
		Number	Street	-	Concluded
Case num	nber			_	

State ZIP Code

City

Document Page 72 of 91 Debtor 1 Christian Hernandez Case number (if known) \_\_\_ First Name Last Name Middle Name Give Details About Your Business or Connections to Any Business Part 11: 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Christian Hernandez** Do not include Social Security number or ITIN. Name **Driver for Uber and Uber Eats** Dates business existed Name of accountant or bookkeeper 14332 Montfort Dr Apt 11304 Street Number From 11/06/2023 To Present. Dallas, TX 75254 State ZIP Code City Describe the nature of the business **Employer Identification number Christian Hernandez-Contract** Do not include Social Security number or ITIN. **Driver Amazon Flex** Amazon Flex Delivery Name Dates business existed Name of accountant or bookkeeper 14332 Montfort Dr Apt 11304 From 2021 To Present Number Street Dallas, TX 75254-8493 **ZIP Code** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No ☐ Yes. Fill in the details below. Date issued MM / DD / YYYY Name Number Street

City

State

**ZIP Code** 

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			Document	Page 73 of 91	
Debtor 1	Christian	Christian			Case number (if known)
	First Name	Middle Name	Last Name		, ,
Part 12: Si	ign Below				
and correct.	I understand that ma	aking a false stateme	nt, concealing prope	rty, or obtaining money or	nder penalty of perjury that the answers are true property by fraud in connection with a J.S.C. §§ 152, 1341, 1519, and 3571.
X /s/ C	Christian Hernando	ez			

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

**√** No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☑ Yes. Name of person \_\_\_\_\_

Signature of Christian Hernandez, Debtor 1

Date **08/24/2024** 

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Texas

In re	(	Christian Hernand	dez				
					Case No.		
Debto	or				Chapter	13	
			DISCLOSURE OF	COMPENSATION OF	ATTORNEY F	FOR DEBTOR	
1.	con	mpensation paid t	o me within one year befo	kr. P. 2016(b), I certify that I re the filing of the petition in contemplation of or in conne	bankruptcy, or a	greed to be paid to m	e, for services rendered
	For	legal services, I	have agreed to accept			<u> </u>	\$4,250.00
	Pric	or to the filing of the	his statement I have receiv	ved		<u> </u>	\$1,169.00
	Bal	ance Due				<u> </u>	\$3,081.00
2.	The	e source of the co	ompensation paid to me wa	as:			
	<b>\( \sqrt{1} \)</b>	Debtor	Other (specify)				
3.	The	e source of compe	ensation to be paid to me i	is:			
	<b>\( \sqrt{1} \)</b>	Debtor	Other (specify)				
4.	_	I have not agree	ed to share the above-disc	losed compensation with an	ny other person u	nless they are membe	ers and associates of my
	law	=		ed compensation with a other			•
5.	In r	eturn for the abov	ve-disclosed fee, I have ag	greed to render legal service	e for all aspects o	f the bankruptcy case	, including:
	a.	Analysis of the bankruptcy;	debtor's financial situation	n, and rendering advice to tl	he debtor in dete	rmining whether to file	e a petition in
	b.	Preparation and	d filing of any petition, sch	edules, statements of affairs	s and plan which	may be required;	
	c.	Representation	of the debtor at the meeti	ing of creditors and confirma	ation hearing, and	d any adjourned heari	ngs thereof;
6.	By	agreement with the	he debtor(s), the above-dis	sclosed fee does not include	e the following se	rvices:	

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B2030 (Form 2030) (12/15)

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/24/2024 /s/ Chris D Anderson

Date Chris D Anderson
Signature of Attorney

Allmand Law Firm, PLLC 860 Airport Fwy Ste 401 Hurst, TX 76054-3264 Phone: (214) 265-0123 Fax: (214) 265-1979

Allmand Law Firm, PLLC

Name of law firm

Fill	in this information to	o identify your case:						-		directed in lines 17 a	
D	ebtor 1	Christian		Hernandez	1				According Statement:	to the calculations re	equired by this
		First Name	Middle Name	Last Name						osable income is not	
	ebtor 2 Spouse, if filing)									1 U.S.C. § 1325(b)(a	
-		First Name	Middle Name	Last Name		_				1 U.S.C. § 1325(b)(	
U	nited States Bankru	ptcy Court for the:	Nor	thern District	of	Texas				commitment period i	
_	ase number known)								<b>√</b> 4. The 0	commitment period i	s 5 years.
								_	☐ Check i	f this is an amended	l filing
Of	ficial Form	122C-1									
		<u></u> Statemen	nt of Volum	Curron	+	Month	ابدا	ncom	10		
	•	ation of Co					пуп	HCOH	IE		40/40
		curate as possible. If					oguall	v rocnoncil	olo for boin	a accurate If more	10/19
atta	ch a separate sheet	to this form. Include									
and	case number (if kn	own).									
Pa	rt 1: Calculate	Your Average Mo	nthly Income								
1.	What is your marit	tal and filing status?	Check one only.								
	Not married. Fi	Il out Column A, lines	s 2-11.								
	Married. Fill out	both Columns A and	d B, lines 2-11.								
10 va ex	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.										
	·						Ī	Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages payroll deductions)	, salary, tips, bonuse	es, overtime, and c	commissions (t	befo	ore all		\$6,2	50.01		-
3.	Alimony and main	tenance payments.	Do not include pay	ments from a s	pou	ise.			\$0.00		_
4.	your dependents, unmarried partner,	any source which ar including child supp members of your ho t include payments fr	<b>port.</b> Include regula ousehold, your depe	ar contributions endents, parent	fror s, a	m an ınd	or		<u>\$0.00</u>		-
5.	Net income from c	pperating a business	s, profession, or	Debtor 1		Debtor 2					
	Gross receipts (be	fore all deductions)		\$513.11		\$0.00					
	Ordinary and nece	ssary operating expe	enses -	\$376.33	-	\$0.00					
	Net monthly incom	e from a business, p	rofession, or farm	\$136.78		\$0.00	Copy here –	<u>,        \$1</u>	<u>36.78</u>		-
6.	Net income from r	ental and other real	property	Debtor 1		Debtor 2					
	Gross receipts (be	fore all deductions)		\$0.00		\$0.00					
	Ordinary and nece	ssary operating expe	enses -	\$0.00	-	\$0.00					
	Net monthly incom	e from rental or othe	r real property	\$0.00		\$0.00	Сору		\$0.00		_
			L				here –	<del></del>			-

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Case number (if known) \_

Debtor 1

Christian

First Name Middle Name Last Name

The traine made traine East raine			
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7. Interest, dividends, and royalties	\$0.00		
8. Unemployment compensation	\$0.00		
Do not enter the amount if you contend that the amount received was a benefit under			
the Social Security Act. Instead, list it here:			
For you			
For your spouse			
9. <b>Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00		
10. <b>Income from all other sources not listed above.</b> Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
Total amounts from separate pages, if any.			
Total amounts from separate pages, if any.	#C 20C 70	T	fc 200 70
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	<u>\$6,386.79</u>	+	= \$6,386.79
Column. Then add the total for Column A to the total for Column B.			Total average monthly income
Part 2: Determine How to Measure Your Deductions from Income			monthly income
art 2. Determine now to measure rour beductions nom income			
12. Copy your total average monthly income from line 11.			\$6,386.79
13. Calculate the marital adjustment. Check one:			
☑ You are not married. Fill in 0 below.			
You are married and your spouse is filing with you. Fill in 0 below.			
You are married and your spouse is not filing with you.			
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid your dependents, such as payment of the spouse's tax liability or the spouse's support of dependents.			
Below, specify the basis for excluding this income and the amount of income devoted to additional adjustments on a separate page.	o each purpose. If necess	ary, list	
If this adjustment does not apply, enter 0 below.			
Total	\$0.00 Copy	here. $ ightarrow$ -	\$0.00
		, , , , , , , , , , , , , , , , , , ,	
14. Your current monthly income. Subtract the total in line 13 from line 12.			\$6,386.79

Debtor 1	Case 24-32530 Christian	o-swei3 Doc	Document	Page 78 of	91		nown)	
	First Name	Middle Name	Last Name			ase namber (# k/	10W11)	
15. <b>Calc</b> u	ılate your current mont	hly income for the yea	ar. Follow these steps	S:				
15a.	Copy line 14 here →						<u>-</u>	\$6,386.79
1	Multiply line 15a by 12 (	the number of months	in a year).				2	<b>x</b> 12
15b.	The result is your curre	ent monthly income for	the year for this part	of the form				\$76,641.48
16. Calcu	late the median family	income that applies to	o you. Follow these s	teps:				
16a.	Fill in the state in which	ı you live.		Texas				
16b.	Fill in the number of pe	ople in your household	d	1				
16c.	Fill in the median family	v income for vour state	and size of househc	ld				\$61,460.00
	To find a list of applicab instructions for this form	le median income amo	ounts, go online using	the link specified	in the separate		_	<del>- +</del>
17. <b>How</b> (	do the lines compare?							
17a.	☐ Line 15b is less th	nan or equal to line 16d (3). <b>Go to Part 3.</b> Do No	c. On the top of page	1 of this form, che	ck box 1, <i>Disp</i> ole Income (Offi	osable income is cial Form 122C-	not determined un	nder 11
17b.	Line 15b is more 1325(b)(3). <b>Go to</b>	than line 16c. On the to Part 3 and fill out Caloncome from line 14 abo	op of page 1 of this fo	orm, check box 2, I	Disposable inc	ome is determine	ed under 11 U.S.C.	
Part 3: 0	Calculate Your Com			325(b)(4)				
18 <b>Conv</b>	your total average mo	nthly income from line						******
19. <b>Dedu</b> calcul amou	ct the marital adjustme lating the commitment p nt from line 13.	ent if it applies. If you a period under 11 U.S.C.	are married, your spo § 1325(b)(4) allows y	use is not filing wit	h you, and you of your spouse'	contend that s income, copy t	he	\$6,386.79
19a. If	the marital adjustment	does not apply, fill in 0	on line 19a				········-	\$0.00
19b. <b>S</b>	ubtract line 19a from li	ne 18.						\$6,386.79
20. Calcu	ılate your current mont	hly income for the yea	ar. Follow these steps	S.				
20a. Co	py line 19b							\$6,386.79
М	ultiply by 12 (the numbe	r of months in a year).					<b>x</b> 12	2
20b. Th	e result is your current i	monthly income for the	year for this part of t	he form.				\$76,641.48
20c. Co	py the median family in	come for your state an	nd size of household f	rom line 16c			<u> </u>	\$61,460.00
21. <b>How</b> (	do the lines compare?							
	e 20b is less than line 2 e commitment period is		ordered by the court,	on the top of page	1 of this form,	check box 3,		
☑ Line	e 20b is more than or ed	qual to line 20c. Unless		y the court, on the	top of page 1	of this form,		
Part 4: S	Sign Below							
By sign	ning here, under penalty	of perjury I declare th	nat the information on	this statement and	d in any attachi	ments is true and	d correct.	
X	, /s/ Christian Herna	andez						
, ,	Signature of Debtor 1							

If you checked 17a, do NOT fill out or file Form 122C-2.

Date **08/24/2024** MM/ DD/ YYYY

If you checked 17b, fill out Form 122C–2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case 24-32536-swe13 Doc 1 Filed 08/24/24 Entered 08/24/24 15:10:35 Desc Main Fill in this information to identify your case: Debtor 1 Christian Hernandez First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name **Northern District of Texas** United States Bankruptcy Court for the: Check if this is an Case number (if known) amended filing Official Form 122C-2 Chapter 13 Calculation of Your Disposable Income 04/22 To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1). Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). Part 1 Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1. If your expenses differ from month to month, enter the average expense. Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. **National Standards** You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National \$808.00 Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the

dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher

than this IRS amount, you may deduct the additional amount on line 22.

First Name

Page 80 of 91 Document Debtor 1 Christian Case number (if known) \_

Middle Name

Last Name

	People who are u	nder 65 years of age					
	7a. Out-of-pocke	t health care allowance per person	\$83.00				
	7b. Number of po	eople who are under 65	X <u>1</u>				
	7c. Subtotal. Mu	Itiply line 7a by line 7b.	\$83.00		opy ere →\$	83.00	
	People who are 6	5 years of age or older					
	7d. Out-of-pocke	t health care allowance per person	\$158.00				
	7e. Number of po	eople who are 65 or older	x <b>0</b>				
	7f. Subtotal. Mu	Itiply line 7d by line 7e.	\$0.00		opy + ere →	\$0.00	
7	'g. <b>Total.</b> Add lines	7c and 7f				\$83.00 Copy here →	\$83.00
						<u> </u>	
	ocal :andards     You mu:	st use the IRS Local Standards to ans	swer the questions in lines	8-15.			
			· ·				
	ed on information fr kruptcy purposes in	om the IRS, the U.S. Trustee Programon to two parts:	m has divided the IRS Loc	al Standard fo	r housing for		
		<ul> <li>Insurance and operating expense</li> </ul>	es				
• F	lousing and utilities	- Mortgage or rent expenses					
		s in lines 8-9, use the U.S. Trustee Pre instructions for this form. This cha					
8.		es – Insurance and operating expensions of the state of t		eople you ente	ered in line 5, fill	in	\$643.00
9.	Housing and utiliti	es - Mortgage or rent expenses:					
		ber of people you entered in line 5, fi county for mortgage or rent expenses			\$1,375.00	<u>0</u>	
	9b. Total average your home.	monthly payment for all mortgages ar	nd other debts secured by				
	contractually of	e total average monthly payment, adduct to each secured creditor in the 60 ext divide by 60.					
	Name of the	creditor	Average monthly payment				
			+				
	9b. To	otal average monthly payment	\$0.00	Copy here →	- \$0.00	Repeat this amount on line 33a.	
	9c. Net mortgage of Subtract line 9b this number is I	or rent expense. o ( <i>total average monthly payment</i> ) from ess than \$0, enter \$0.	m line 9a ( <i>mortgage or ren</i> i	expense). If	\$1,375.0	O Copy here →	\$1,375.00
10.		e U.S. Trustee Program's division of our monthly expenses, fill in any ad			ncorrect and aff	ects	\$0.00
	Explain						

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Debtor 1 Christian Page 81 of 91 Case number (if known) Last Name

11.	Local transpo	ortation expenses: Che	ck the number	of vehicles for which yo	u claim an ov	vnership or opera	ting expense.	
	☐ 0. Go to I							
	<b>☑</b> 1. Go to I							
	_	e. Go to line 12.						
12.				andards and the numbe our Census region or m			n the operating	\$292.00
13.	vehicle below		expense if you	S Local Standards, calculudo not make any loan o				
	Vehicle 1	Describe Vehicle 1:	2020 Kia S Debtor's mair	oul n source of transportation				
	13a. Ownersł	hip or leasing costs using	g IRS Local St	andard		\$619.00	<u> </u>	
	13b. Average	monthly payment for all	debts secured	d by Vehicle 1.				
	Do not in	nclude costs for leased v	ehicles.					
	amounts	late the average monthly that are contractually d after you file for bankrup	ue to each sec		ıll			
	Name of	each creditor for Vehic	le 1	Average monthly payment				
	Resour	ce One Credit Union		\$284.13				
				+				
	13c. Net Vehi	Total average mo		\$284.13	Copy here →		Repeat this amount on line 33b.	
	Subtract line 13b from line 13a. If this number is			s less than \$0, enter \$0				\$334.87
	Vehicle 2	Describe Vehicle 2:						
				andard				
	Ū	monthly payment for all		d by Vehicle 2.				
		nclude costs for leased v						
	Name of	each creditor for Vehic	le 2	Average monthly payment				
				+				
		Total average mo		$\begin{array}{c} \text{Copy} \\ \text{here} \rightarrow \end{array}$		Repeat this amount on line 33c.		
	13f. Net Veh	icle 2 ownership or lease	expense				Copy net Vehicle 2	
	Subtract	line 13e from 13d. If thi	s number is le	ss than \$0, enter \$0			expense here $\rightarrow$	
14.				ehicles in line 11, using whether you use public			the <i>Public</i>	
15.	public transpo		ay fill in ẃhat y	aimed 1 or more vehicle rou believe is the approp			it you may also deduct a t claim more than the	\$0.00

Debtor 1

First Name Middle Name Last Name

Page 82 of 91 Document Christian Case number (if known) \_\_\_

	ther Necessary openses	In addition to the expense following IRS categories.		ted above, you are allowed your monthly expenses for the					
16.	social security taxes, you expect to receive that is withheld to pay	and Medicare taxes. You n a tax refund, you must div	nay include the m	al, state and local taxes, such as income taxes, self-employment taxes, monthly amount withheld from your pay for these taxes. However, if d refund by 12 and subtract that number from the total monthly amount	\$988.44				
17.	uniform costs.			nat your job requires, such as retirement contributions, union dues, and as voluntary 401(k) contributions or payroll savings.	\$0.00				
18.	include payments that	you make for your spouse	's term life insura	ur own term life insurance. If two married people are filing together, rance. for a non-filing spouse's life insurance, or for any form of life insurance	\$6.80				
19.	spousal or child suppo	ort payments.		ay as required by the order of a court or administrative agency, such as child support. You will list these obligations in line 35.	\$0.00				
20.		monthly amount that you p	ay for education	n that is either required:	\$0.00				
	<ul><li>as a condition for y</li><li>for your physically</li></ul>		pendent child if n	no public education is available for similar services.					
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  Do not include payments for any elementary or secondary school education.								
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.								
23.	Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 122C-1, or any amount you previously deducted.								
24.	Add all of the expens Add lines 6 through 23	es allowed under the IRS 3.	expense allowa	ances.	\$4,531.11				
	dditional Expense eductions	These are additional dedinate: Do not include any							
25.				count expenses. The monthly expenses for health insurance, disability cessary for yourself, your spouse, or your dependents.					
	Health insurance		\$154.65						
	Disability insurance		\$0.00						
	Health savings accou	unt +	\$0.00						
	Total		<u>\$154.65</u>	Copy total here →	\$154.65				
	Do you actually spend	d this total amount?							
	☐ No. How much do  ✓ Yes	you actually spend?							
26.	The actual monthly exill, or disabled member	er of your household or mei	nue to pay for the mber of your imn	nembers. The reasonable and necessary care and support of an elderly, chronically mediate family who is unable to pay for such expenses. These I ABLE program. 26 U.S.C. § 529A(b).	\$0.00				
27.	family under the Fami		d Services Act or	monthly expenses that you incur to maintain the safety of you and your or other federal laws that apply.  dential.	\$0.00				

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		_ 0 0	.,	,,, <del> </del>	_
Debtor 1	Christian	Document	Page 83 of 91	Case number (if know	n)_

Last Name

Middle Name

First Name

28.	Additional home energy costs. Your hom	ne energy costs are included in your insu	rance and operating	expenses on line 8				
	If you believe that you have home energy the excess amount of home energy costs		gy costs included in e	expenses on line 8,	then fill in	\$0.00		
	You must give your case trustee docume reasonable and necessary.	ntation of your actual expenses, and you	must show that the a	additional amount c	laimed is			
29.	Education expenses for dependent child that you pay for your dependent children school.					\$0.00		
	You must give your case trustee docume reasonable and necessary and not alread	•	must explain why the	e amount claimed is	3			
	* Subject to adjustment on 4/01/25, and e	every 3 years after that for cases begun o	on or after the date of	adjustment.				
30.	Additional food and clothing expense. To combined food and clothing allowances in allowances in the IRS National Standards	n the IRS National Standards. That amou				\$0.00		
	To find a chart showing the maximum add This chart may also be available at the ba		k specified in the sep	arate instructions for	or this form.			
	You must show that the additional amount claimed is reasonable and necessary.							
31.	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a + \$0.00 religious or charitable organization. 11 U.S.C. § 548(d)3 and (4).							
	Do not include any amount more than 15	% of your gross monthly income.						
32.	Add all of the additional expense deductions. Add lines 25 through 31.  \$154.65							
Ded	uctions for Debt Payment							
33.	For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.							
	To calculate the total average monthly pa the 60 months after you file for bankrupto		ually due to each sec	cured creditor in				
				erage monthly				
			pa	yment				
	Mortgages on your home							
	33a. Copy line 9b here		→	\$0.00				
	Loans on your first two vehicles							
	33b. Copy line 13b here			\$284.13				
	33c. Copy line 13e here		→					
	33d. List other secured debts:							
	Name of each creditor for other	Identify property that secures the	Does payment					
	secured debt	debt	include taxes or insurance?					
			☐ No					
			Yes					
			No No					
			Yes					
		-	- ☐ No ☐ Yes	+				
				\$284.13	Copy total	<b>MOC</b> 4 45		
	33e. Total average monthly payment. Ac	dd lines 33a through 33d		Ψ204.10	here→	<u>\$284.13</u>		

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Debtor 1

Christian

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First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_\_\_

34.	Are any debts that you listed in lin support or the support of your dep		esidence, a vehicle	e, or other pro	operty necessary for	your	
	☐ No. Go to line 35.						
	Yes. State any amount that you possession of your property (cal	must pay to a creditor, in addition led the cure amount). Next, divide	on to the payments de by 60 and fill in t	listed in line 3 he information	33, to keep n below.		
	Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount		
				÷ 60 =			
				÷ 60 =			
				÷ 60 =	+		
				Total	<u>\$0.00</u>	Copy total here →	\$0.00
35.	Do you owe any priority claims—s bankruptcy case? 11 U.S.C. § 507		pport, or alimony–	-that are pas	t due as of the filing	date of your	
	☐ No. Go to line 36.						
	Yes. Fill in the total amount of all those you listed in line 19.	I of these priority claims. Do not	include current or o	ongoing priori	ty claims, such as		
	Total amount of all past-due	e priority claims			\$3,081.00	÷ 60	<u>\$51.35</u>
36.	Projected monthly Chapter 13 plan	n payment		,	\$1,180.00		
	Current multiplier for your district United States Courts (for district United States Trustees (for all of	s in Alabama and North Carolin					
	To find a list of district multipliers the separate instructions for this office.				× <u>10.00%</u>		
	Average monthly administrative	expense			\$118.00	Copy total here →	\$118.0 <u>0</u>
37.	Add all of the deductions for debt	payment. Add lines 33e through	า 36.				\$453.48
Total	Deductions from Income						
38.	Add all of the allowed deductions.						
	Copy line 24, All of the expenses al	llowed under IRS expense allow	/ances		\$4,531.11		
	Copy line 32, All of the additional ex	xpense deductions			<u>\$154.65</u>		
	Copy line 37, All of the deductions is	for debt payment			+ \$453.48	Сору	
	Total deductions				\$5,139.24 t	otal nere →	\$5,139.24

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Debtor 1

Christian

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Par	t 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)							
39.	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.	\$6,386.79						
40.	Fill in any reasonably necessary income you receive for support for dependent children.  The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.							
41.	1. <b>Fill in all qualified retirement deductions.</b> The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).							
42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here → \$5,139.24								
43.	<b>Deduction for special circumstances.</b> If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.							
	Describe the special circumstances  Amount of expense							
	<del></del>							
	+							
	Total \$0.00 Copy here → + \$0.00							
44.	Total adjustments. Add lines 40 through 43	\$5,660.40						
45.	Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.	\$726.39						
Par	Change in Income or Expenses							
46.	Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.							
F	Form Line Reason for change Date of change Increase or decrease?	of change						
	122C-1       □ Increase         122C-2       □ Decrease	_						
	☐ Increase	_						
	122C-2 — Decrease							

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First Name Last Name Middle Name

Page 86 of 91 Document Debtor 1 Christian Case number (if known) \_

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Christian Hernandez

Signature of Debtor 1

Date 08/24/2024 MM/ DD/ YYYY

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## IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: Christian Hernandez	CASE NO
	CHAPTER 13

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date	08/24/2024	Signature	/s/ Christian Hernandez
		_	Christian Hernandez Debtor

Affirm, Inc. 650 California St Fl 12 San Francisco, CA 94108-2716

Allmand Law Firm, PLLC 860 Airport Fwy Ste 401 Hurst, TX 76054-3264

Attorney General of Texas Bankruptcy Collection Division PO Box 12017 Austin, TX 78711

Avant / Webbank Attn: Bankruptcy 222 N LaSalle St, Ste 1700 Chicago, IL 60601

Capital One by American InfoSource as Agent PO Box 71083 Charlotte, NC 28272

Christian Hernandez 14332 Montfort Dr Apt 11304 Dallas, TX 75254

Conn's HomePlus 2445 Technology Forest Boulevard Building 4, Suite 800 The Woodlands, TX 77381

First National Bank/Legacy Attn: Bankruptcy PO Box 5097 Sioux Falls, SD 57117-5097 First Savings Bank Attn: Bankruptcy PO Box 5019 Sioux Falls, SD 57117

Fnb Omaha Attn: Bankruptcy PO Box 2490 Omaha, NE 68103

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Gloria Gallego Winslow 2190 S Uecker Ln Lewisville, TX 75067-7801

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Linebarger Goggan Blair & Sampson, LLP 2777 N. Stemmons Frwy Ste 1000 Dallas, TX 75207

Lvnv Funding/Resurgent Capital Attn: Bankruptcy PO Box 10497 Greenville, SC 29603

Mission Lane LLC Attn: Bankruptcy Po Box 105286 Atlanta, GA 30348 MoneyLion, Inc Attn: Bankruptcy Dept P.O. Box 1547 Sandy, UT 84091-1547

#### **NCB Management Services**

Attn: Manager/Attn Officer P.O. Box 1099 Langhorne, PA 19047

#### Nebraska Furniture Mart

Bankruptcy PO Box 2335 Omaha, NE 68103

#### Nordstrom FSB

P.O. Box 6555 Englewood, CO 80155

#### NTTA

PO Box 660244 Dallas, TX 75266

#### Oportun

P.O. Box 2063 Menlo Park, CA 94026

#### Reach Financial

Attn: Bankruptcy Attn: Bankruptcy 180 Miaden Lane , Ste 2801 New York, NY 10038

#### Republic Finance Llc

7031 Commerce Cir. Baton Rouge, LA 70809 Resource One Credit Union Po Box 790408 Saint Louis, MO 63179

S2 Montfort LP 14332 Montfort Dr Dallas, TX 75254

Spectrum PO Box 38250 Charlotte, NC 28278

Texas Alcoholic Beverage Comm Licenses and Permits Division PO Box 13127 Austin, TX 78711-3127

The Voom Group 1825 E Plano Pkwy Plano, TX 75074-8502

United States Attorney -NORTH 3rd. Floor, 1100 Commerce St Suite 700 Dallas, TX 75242

United States Trustee Rm 976 1100 Commerce Street Suite 300 Dallas, TX 75242

US Attorney General US Department of Justice 950 Pennsylvania Ave, NW Washington, DC 20530